# CHAPTER 16 RR/PASRR "CHOICE" FOR SPECIALIZED SERVICES

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## CHAPTER 16 RR/PASRR "CHOICE" FOR SPECIALIZED SERVICES

#### 16.1 "CHOICE" OF SPECIALIZED SERVICES' SETTING

Federal regulations provide that certain residents may, under specific circumstances, remain in a NF to receive "RR/PASRR specialized services when they would not ordinarily qualify for continued placement.

(See Chapter 13.5 for PASRR "specialized services.")

When a resident qualifies, information on the "RR/PASRR Choice" options and the treatment decision must be provided to the resident and/or his or her legal representative.

#### 16.2 "RR/PASRR CHOICE"

For PASRR purposes, a "long-term resident" is a NF resident who has resided continuously in one or more NFs including brief hospitalization.

The "RR/PASRR Choice" refers to

- a) does NOT require NF level of services;
- b) does need specialized services; and
- c) has continuously resided in a NF for at least 30 consecutive months before the date of the RR determination;
- d) may choose to receive the specialized services:
  - 1) while continuing to reside in the NF; OR
  - 2) in an alternative appropriate institutional or noninstitutional setting.

This "30-month" qualifier:

- a) only applies to the RR of PASRR; and
- b) <u>all</u> requirements stated above must be met.

In this situation, need for RR/PASRR specialized services is the only need which qualifies the individual for continued NF placement. Thus, the resident must receive the identified specialized services or he or she cannot continue to reside in a Medicaid-certified NF.

#### 16.1.1 Qualifying Criteria

Persons eligible for the "RR/PASRR Choice" option must meet ALL of the criteria listed below.

- a) NF Resident. The individual must be a current resident of a Medicaid-certified NF.
- b) Does <u>NOT</u> Need NF Level of Services. The individual must be determined by PASRR RR NOT to need the NF level of services.
- c) Not a danger to self or others. The individual's severe behavioral problems which constitute a potential danger to self or others must be controllable with the provision of specialized services.
- d) Is MI and/or MR/DD. The resident's condition must meet the PASRR criteria for MI and/or MR/DD.
- e) <u>Needs</u> specialized services. The resident's need for treatment of his or her MI and/or MR/DD condition must be of an intensity to qualify as PASRR specialized services.
- f) Resident of a NF for <u>30-Months or More</u>. For PASRR purposes, an individual is a long-term NF resident if he or she has resided continuously in a NF for 30-months or more, regardless of short-term care in an acute-care hospital (not a state psychiatric facility).

#### 16.2.2 Process to "Offer the RR/PASRR Choice"

When all of the conditions listed above are met, the resident may be offered the "choice" of setting in which to receive his or her specialized services.

#### 16.2.1 Presentation of the "RR/PASRR Choice"

For residents with MI, the local (contact the State PASRR Unit at BAIHS) will contact the resident and offer the "choice."

For residents with MR/DD, the BDDS Field Services Office will be responsible to offer the "choice."

#### 16.2.2 Contents of Presentation.

The following information must be presented to the resident and/or his or her legal representative:

- a) information on institutional and non-institutional alternatives covered under the State Plan (Medicaid) for the resident:
- b) the "choice" of receiving specialized services in an alternative institutional or non-institutional setting or in the NF;

NOTE: Based on the definition of MI specialized services (services equivalent to inpatient psychiatric hospital care), it usually is not possible for a NF to establish and provide MI specialized services within the NF setting for the individual who needs them.

Due to the episodic nature of most MI, short periods of specialized services treatment may be needed rather than long-term placement. When it is anticipated that provision of specialized services will be for a brief period, and result in stabilization of the condition so that readmission to the NF is possible, the "PASRR/MI Choice" option will not be applied.

NECESSARY TREATMENT AND SERVICES SHOULD ALWAYS BE OBTAINED AS QUICKLY AS POSSIBLE AND SHOULD NOT BE DELAYED AWAITING COMPLETION OF THE PAPERWORK INVOLVED WITH THE LEVEL II PROCESS.

- c) explanation that refusal to participate in specialized services will result in discharge from the NF; and
- d) clarification of the effect on eligibility for services under the State Plan (Medicaid) if the person chooses to leave the NF (including its effect on readmission to the NF). If this option is chosen, the NF is responsible for doing adequate discharge planning.

#### 16.3 General Guidelines and Procedures

Procedures may need to be adjusted to meet the needs of Individual situations. The following guidelines will assist the (contact the State PASRR Unit at BAIHS) or BDDS Field Services representative to offer the "RR/PASRR Choice."

Note: In no event will the NF or other potential service provider perform this function.

#### 16.3.1 Procedures

a) Identification and Referral. For MI individuals, the State PASRR/MI program specialist will review the RR determinations and make a referral of those residents who qualify for this provision to the State (Contact the State PASRR Unit at BAIHS).

For MR/DD individuals, the BDDS Field Services staff will monitor RR determinations and assure that residents who qualify for this provision are appropriately referred.

- b) The referral will be documented in writing in the resident's PASRR/RR case record. As much information as possible relative to the PASRR case will be provided to the identified presenter.
- c) The PASRR presenter (contact the State PASRR Unit at BAIHS or BDDS representative) will contact the resident and his or her legal representative, as well as the NF, to set up a meeting. All activities are to be documented in writing in the case record. The findings with the case record will follow the determination procedures for an RR. The PASRR presenter should retain a copy of the records on file.

The purpose of the meeting is to present the PASRR/RR finding, to review all alternatives or options, to answer questions and clarify issues, and to elicit and record the resident's choice. The NF may assist with setting up the meeting, but must refrain from exerting any influence with the resident. Questions should always be referred to the PASRR presenter. In order to maintain objectivity, the NF or other potential service provider should not attend the meeting, but may provide information to the PASRR presenter.

d) The resident's choice and other pertinent information are recorded in the PASRR case record. The original case is sent to the State PASRR Unit, a copy of the decision is provided to the resident and his or her legal representative, and a copy retained by the PASRR presenter.

#### 16.3.2 PASRR/MI Guidelines

The following procedures, initially developed to meet Indiana's Alternative Disposition Plan (ADP), will be followed to assure that specialized services are available for MI residents identified above who agree to receive them.

- a) Refer the identified individual to become a client of the local CMHC, if he or she is not already being followed by a CMHC.
- b) Move the individual to an inpatient psychiatric unit housed in, or under contract to, the CMHC.
- c) Each individual may be provided with an average of twenty (20) days of inpatient psychiatric care.
- d) Individuals whose conditions have stabilized during inpatient treatment in the CMHC may be placed in appropriate residential programs, including but not limited to: supervised group living for persons with MI; semi-independent living for persons with MI; alternative family for adults with MI; and alternative family for children with serious emotional disturbance.
- e) Individuals whose conditions have not stabilized within 20 days should be referred for placement in state operated psychiatric hospitals.

NOTE: It is noted that the Division of Mental Health does not have the authority to require individuals to accept mental health services unless that person Is involuntarily committed by court action. Otherwise, the individual has the right to refuse treatment.

For the purposes of this legislation, the resident or his or her legal representative acting in his behalf will be offered alternative services. Anyone not committed to the Division of Mental health has the right under state law to refuse services.

However, a Medicaid-certified NF is prohibited from retaining any resident needing specialized services but refusing such services.

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